

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION
 O.I.P.E. CLASSIFIER
 FORMALITY REVIEW
 RESPONSE FORMALITY REVIEW

INDEX OF CLAIMS

✓	Rejected	N	N Rejected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
:	Restricted	O	Objected

Claim	Date	Claim	Date	Claim	Date
4	04/19/4	5	03/17/5	6	02/06/53
7	4/19/4	8	3/17/5	9	2/6/53
10	11/19/4	11	10/17/5	12	9/6/53
13	12/19/4	14	11/17/5	15	10/6/53
16	13/19/4	17	12/17/5	18	11/6/53
19	14/19/4	20	13/17/5	21	12/6/53
22	15/19/4	23	14/17/5	24	13/6/53
25	16/19/4	26	15/17/5	27	14/6/53
28	17/19/4	29	16/17/5	30	15/6/53
31	18/19/4	32	17/17/5	33	16/6/53
34	19/19/4	35	18/17/5	36	17/6/53
37	20/19/4	38	19/17/5	39	18/6/53
40	21/19/4	41	20/17/5	42	19/6/53
43	22/19/4	44	21/17/5	45	20/6/53
46	23/19/4	47	22/17/5	48	21/6/53
49	24/19/4	50	23/17/5		
		100			

If more than 150 claims or 10 actions
 staple additional sheet here

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